



PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

Effective December 8, 2004								10/528868				
CLAIMS AS FILED - PART I (Calumn 1) (Column 2)								SMALL ENT		OR	OTHER SMALL E	
U.S	. NATIONAL	STAGE FEES						RATE	FEE		RATE	FEE
BAS	C FEE		SWALL ENT.	=\$ 150	LARGE ENT. = \$ 300			BASIC FEE	150	OR	BASIC FEE	
EΧ	WINATION FE	E	Satisfies PCT A (4) = \$50		All other alimations © \$ 100/\$ 200			EXAM FEE	100		EXAM. FEE	
SE	VRCH FEE		U.S. b ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500			SEARCH FEE	200		SEARCH FEE	
FEE	FOR EXTRA S	PEC. PGS.	min	us 100 =	/50=			X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			is min	nus 20 =	•			X\$25=		OR	X \$ 50 =	
סאו	EPENDENT CL	AIMS	2 minus 3 =		•			X \$ 100 =		OR	X \$ 200 =	
MUI	TIPLE DEPEN	DENT CLAIM PRI	ESENT					+\$ 180 =		OR	+ \$ 360 =	-
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	450	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A	7-14-06	CLAIMS REMAINING AFTER AMENDMENT		HIGH MUM PREVIX PAID	BER PRESENT OUSLY EXTRA			RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	- 19	Minus	- 2	20	- /		X\$25=		OR	X \$ 50 =	1.
	Independent	· 2	Minus	ے 🗝	3	= /		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$-180=		OR	+\$ 360 =/	
								TOTAL ADDIT.		OR	TOTAL ADDIT. FEE	
		(Column 1)		· (Colun		(Column 3)	_					
2	طاعالا	CLABAS REMAINING AFTER AMENDMENT		HIĞH NUMI PREVIO PAID I	BER NUSLY	PRESENT EXTRA		rate	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 21	Minus	- J	0	- /		X \$ 25 =	25.00	OR	X \$ 50 =	
	Independent	·	Minus	J	2	- 0		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
									15.10	OR	TOTAL ADDIT. FEE	
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Poid For" IN THIS SPACE is less than 20", enter "20". *** If the "Highest Number Previously Poid For IN THIS SPACE is less than 20", enter "20".												

FORM PTO-675 (Rev. 02/2005)

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